

Monolateral ulcerative tonsillitis in a young male

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Abstract

A 24-year-old man presented with fever, throat pain, and diffuse myalgia. Examination revealed an ulcerated right tonsil, twice the size of the contralateral one, which showed no signs of inflammation. No trismus or abscess were observed, and airway obstruction was ruled out with fiberoendoscopy. Blood tests showed an elevated white blood

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Monolateral ulcerative tonsil in a male

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CREDIT CONTRIBUTIONS

Jiang: data curation, formal analysis, investigation, methodology, validation, visualization and writing - original draft. Gallo: Conceptualization, project administration, resources, supervision, review and editing. All authors read and approved the final version of the manuscript.

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Case report

A 24-year-old male patient presented with fever (38.5°C), throat pain, headache, and diffuse myalgia over the course of the last few days. Examination of the oral cavity revealed an ulcerated right tonsil that appeared twice the size of the contralateral tonsil, which was cryptic but showed no signs of inflammation (figure 1). No trismus or signs of abscess were observed, and flexible fiberendoscopy ruled out airway obstruction. Blood tests showed an elevated white blood cell count, and the monospot test for infectious mononucleosis was negative.

Initial treatment included regular analgesia, chlorhexidine mouthwash, and empirical antibiotic therapy. After 10 days, the patient fully recovered.

Discussion

The diagnosis was suspected to be Plaut-Vincent's angina, which was subsequently confirmed by the pharyngeal swab. After 10 days of treatment, the patient showed complete healing.

This condition is a painful infectious condition that primarily affects the interdental and marginal gingiva, associated with monolateral ulcerative tonsillitis. The ulcerative damage is caused by the presence of fusobacteria and spirochetes, specifically *Borrelia vincentii*, in combination with certain anaerobic bacteria¹. Plaut-Vincent's disease primarily affects young individuals who experience stress, immunosuppression, malnutrition, poor oral hygiene, and smoke².

These clinical signs and symptoms typically resolve within a few days after appropriate treatment and meticulous oral hygiene, but patients are still susceptible to recurrences. Various authors stressed the importance of swab and gram stain in suspected acute tonsillitis, where an inflamed tonsil is covered by necrotic material

As a differential diagnosis, in ulcerative tonsillar asymmetry, diphtheria³, lymphoma⁴ and oropharyngeal cancer⁵ should be considered. Therefore, it is crucial to perform oropharyngeal swab and gram stain tests in suspected cases, as symptoms typically resolve with proper treatment.

Conclusion

Plaut-Vincent's disease is an infectious condition that affects the gingiva and is associated with monolateral ulcerative tonsillitis; it resolves with a targeted antibiotic therapy. In tonsillar asymmetry, it is crucial to consider differential diagnoses such as diphtheria, and oropharyngeal cancer. To aid in diagnostic and therapeutic management, performing oropharyngeal swab and gram stain tests is of utmost importance.

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Figures

Figure 1. Ulcerated right tonsil

